

BEST AVAILABLE
COPY

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

7000-115
10020833

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY
TYPE

OTHER THAN
OR SMALL ENTITY

| | | | |
|----------------------------------|---------------|--------------|--------------------------|
| TOTAL CLAIMS | | 28 | |
| FOR | NUMBER FILED | NUMBER EXTRA | |
| TOTAL CHARGEABLE CLAIMS | 28 minus 20 = | 8 | |
| INDEPENDENT CLAIMS | 4 minus 3 = | 1 | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2) (Column 3)

4/25/05
OTHER THAN
SMALL ENTITY OR SMALL ENTITY

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA |
|--|---|---|----|--------------------------|
| | | Minus | ** | |
| Total | 28 | Minus | 28 | = — |
| Independent | 4 | Minus | 4 | = — |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|------------------|------------------------|------------------|------------------------|
| | | OR | OR |
| X\$ 9= | | X\$18= | |
| X42= | | X84= | |
| +140= | | +280= | |
| TOTAL ADDIT. FEE | | TOTAL ADDIT. FEE | |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA |
|--|---|---|----|--------------------------|
| | | Minus | ** | |
| Total | — | Minus | — | = — |
| Independent | — | Minus | — | = — |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|------------------|------------------------|------------------|------------------------|
| | | OR | OR |
| X\$ 9= | | X\$18= | |
| X42= | | X84= | |
| +140= | | +280= | |
| TOTAL ADDIT. FEE | | TOTAL ADDIT. FEE | |

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA |
|--|---|---|----|--------------------------|
| | | Minus | ** | |
| Total | — | Minus | — | = — |
| Independent | — | Minus | — | = — |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
|------------------|------------------------|------------------|------------------------|
| | | OR | OR |
| X\$ 9= | | X\$18= | |
| X42= | | X84= | |
| +140= | | +280= | |
| TOTAL ADDIT. FEE | | TOTAL ADDIT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.